

Robin Carnahan Secretary of State
2010 ANNUAL REGISTRATION REPORT
BUSINESS

File Number: 201029490271

00063218

Date Filed: 10/21/2010

Robin Carnahan
Secretary of State

REPORT DUE BY: **10/31/2010**

00063218

VANDUSER GIN COMPANY

Dennis McElwrath

801 Hamilton PO Box 158

Vanduser, MO 63784

RENEWAL MONTH:

July

☐ I OPT TO CHANGE THE CORPORATION'S

☐ RENEWAL MONTH TO

FOR A \$25.00 FEE.

**PRINCIPAL PLACE OF BUSINESS OR
CORPORATE HEADQUARTERS:**

801 Hamilton

(Required)

STREET

Vanduser, MO

63784

CITY/STATE

ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

☐

The new registered agent

**IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW
REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.**

☐

The new registered office address

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT
ACCEPTABLE). (MUST LIST PRESIDENT AND SECRETARY BELOW)

A

PRES Dennis McElwrath (Required)

STREET/RT **705 Vanduser Street**

CITY/STATE/ZIP **Vanduser, MO 63784**

V-PRES

STREET/RT

CITY/STATE/ZIP

SECY Chuck Ellerbrock (Required)

STREET/RT **4462 Cavendish Drive**

CITY/STATE/ZIP **Toledo, OH 43623**

TREAS

STREET/RT

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT
ACCEPTABLE). (MUST LIST AT LEAST ONE DIRECTOR BELOW)

B

NAME Dennis McElwrath (Required)

STREET/RT **705 Vanduser Street**

CITY/STATE/ZIP **Vanduser, MO 63784**

NAME

STREET/RT

CITY/STATE/ZIP

NAME

STREET/RT

CITY/STATE/ZIP

NAME

STREET/RT

CITY/STATE/ZIP

The undersigned understands that false statements made in this report are punishable for the crime of making a false
declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Dennis McElwrath

(Required)

Please print name and title of signer:

Dennis McElwrath

/

President

NAME

TITLE

REGISTRATION REPORT FEE IS:

___ \$20.00 If filed on or before 10/31

___ \$35.00 If filed on or before 11/30

___ \$50.00 If filed on or before 12/31

___ \$65.00 If filed on or before 1/31

**ADD AN ADDITIONAL \$25.00 FEE IF CHANGING
THE RENEWAL MONTH.**

**WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE,
BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL
INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE**

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO: Secretary of State, P.O. Box 1366, Jefferson City, MO 65102